



UNCLASSIFIED

INTERNAL
USE ONLY

CONFIDENTIAL



SECRET

ROUTING AND RECORD SHEET

SUBJECT: (Optional)

FROM:

Chief, CI Staff

EXTENSION

NO.

DATE

TO: (Officer designation, room number, and building)

DATE

RECEIVED

FORWARDED

OFFICER'S
INITIALS

COMMENTS (Number each comment to show from whom to whom. Draw a line across column after each comment.)

1.

DDS/OS 4 E 60

2.

3.

4.

5.

6.

7.

8.

9.

10.

11.

12.

13.

14.

15.

FORM



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